

# TRANSMITTAL FORM

Application Serial Number 09/928,102  
Filing Date August 10, 2001  
First Named Inventor Perls  
Group Art Unit 1645  
Examiner Name Not Yet Assigned  
Attorney Docket No. BIT-001

## ENCLOSURES (check all that apply)

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Check Attached<br><input type="checkbox"/> Copy of Fee Transmittal Form  | <input type="checkbox"/> Copy of Notice to File Missing Parts of Application (PTO-1553)<br><input type="checkbox"/> Formal Drawing(s)   | <input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences<br><input type="checkbox"/> Appeal Brief (in triplicate)  |
| <input type="checkbox"/> Amendment/Response<br><input type="checkbox"/> Preliminary<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets ____] | <input type="checkbox"/> Request For Continued Examination (RCE) Transmittal<br><input type="checkbox"/> Power of Attorney (Revocation of Prior Powers)<br><input type="checkbox"/> Terminal Disclaimer | <input type="checkbox"/> Status Inquiry<br><input checked="" type="checkbox"/> Return Receipt Postcard<br><input checked="" type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8<br><input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8 |
| <input type="checkbox"/> Petition for Extension of Time  | <input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application  | <input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below)<br><input checked="" type="checkbox"/> Request for Corrected Filing Receipt  |
| <input type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Form PTO-1449<br><input type="checkbox"/> Copies of IDS Citations  | <input type="checkbox"/> Small Entity Statement<br><input type="checkbox"/> CD(s) for large table or computer program   | <input checked="" type="checkbox"/> Copy of Filing Receipt with corrections marked in red.   |
| <input type="checkbox"/> Certified Copy of Priority Document(s)  | <input type="checkbox"/> Amendment After Allowance<br><input type="checkbox"/> Request for Certificate of Correction<br><input type="checkbox"/> Certificate of Correction (in duplicate)               |  |
| <input type="checkbox"/> Sequence Listing submission<br><input type="checkbox"/> Paper Copy/CD<br><input type="checkbox"/> Computer Readable Copy<br><input type="checkbox"/> Statement verifying identity of above  |   |  |

## CORRESPONDENCE ADDRESS

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Testa, Hurwitz & Thibault, LLP  
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125 High Street  
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## SIGNATURE BLOCK

Respectfully submitted,  
  
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Attorney for Applicants  
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Date: January 31, 2002  
Reg. No. P-50,794  
Tel. No.: (617) 310-8158  
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***IN THE UNITED STATES PATENT AND TRADEMARK OFFICE***

APPLICANT(S): Perls  
SERIAL NO.: 09/928,102 GROUP NO.: 1645  
FILED: August 10, 2001 EXAMINER: Not Yet Assigned  
TITLE: Genetic Loci Indicative of Propensity For Longevity and  
Methods For Identifying Propensity For Age-Related Disease

Office of Initial Patent Examination  
Customer Service Center  
Commissioner for Patents  
Washington, DC 20231

**REQUEST FOR CORRECTED FILING RECEIPT**

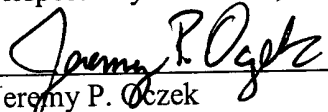
1. Attached is a copy of the official filing receipt received from the Patent Office for the above-identified application for which issuance of a corrected filing receipt is respectfully requested.
2. There is an error with respect to the number listed under the "DRAWINGS" heading, which was incorrectly entered by the Patent Office. The above-identified application was filed with 24 drawings. Therefore, please correct the number listed under the "DRAWINGS" heading to "24".

Date: January 31, 2002  
Reg. No. P-50,794

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Respectfully submitted,

  
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Jeremy P. Ocze  
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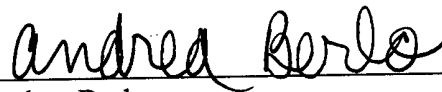
PATENT  
Attorney Docket No. BIT-001  
(1538/47)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT(S): Perls et al.  
SERIAL NO.: 09/928,102 GROUP NO.: 1645  
FILING DATE: August 10, 2001 EXAMINER: Not Yet Assigned  
TITLE: Genetic Loci Indicative of Propensity For Longevity and Methods  
For Identifying Propensity For Age-Related Disease

**CERTIFICATE OF FIRST CLASS MAILING UNDER 37 C.F.R. 1.8**

I hereby certify that this correspondence, and any document(s) referred to as enclosed herein, is/are being deposited with the United States Postal Service as first class mail, postage prepaid, in an envelope addressed to the Office of Initial Patent Examination, Customer Service Center, Commissioner for Patents, Washington, DC 20231 on this 31<sup>st</sup> day of January, 2002.

  
Andrea Berlo

Office of Initial Patent Examination  
Customer Service Center  
Commissioner for Patents  
Washington, D.C. 20231

Sir:

Submitted herewith is/are:

Transmittal (1 page);  
Request for Corrected Filing Receipt (1 page);  
Copy of Filing Receipt with corrections marked in red (1 page); and a  
Return receipt postcard.



## UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS  
UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D.C. 20231  
www.uspto.gov

APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/928,102	08/10/2001	1645	620	BIT-001 (1538/47)	25 <b>24</b>	14	8

021323  
TESTA, HURWITZ & THIBEAULT, LLP  
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125 HIGH STREET  
BOSTON, MA 02110

CONFIRMATION NO. 6355

## UPDATED FILING RECEIPT



\*OC000000007314681\*

PATENT OFFICE  
TESTA, HURWITZ & THIBEAULT, LLP

Date Mailed: 01/16/2002

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. **If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).**

## Applicant(s)

Thomas T. Perls, Weston, MA;  
Louis Kunkel, Westwood, MA;  
Annibale A. Puca, Boston, MA;

## Domestic Priority data as claimed by applicant

THIS APPLN CLAIMS BENEFIT OF 60/224,643 08/11/2000  
AND CLAIMS BENEFIT OF 60/249,921 11/17/2000

## Foreign Applications

If Required, Foreign Filing License Granted 09/18/2001

Projected Publication Date: 04/25/2002

Non-Publication Request: No

Early Publication Request: No

**\*\* SMALL ENTITY \*\***

## Title

Genetic loci indicative of propensity for longevity and methods for identifying propensity for age-related disease



# UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS  
UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, DC 20231  
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APPLICATION NUMBER	FILING DATE	FIRST NAMED APPLICANT	ATTY. DOCKET NO./TITLE
09/928,102	08/10/2001	Thomas T. Perl	BIT-001(1538/47)

CONFIRMATION NO. 6355

021323  
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\*OC000000007579861\*

Date Mailed: 03/05/2002

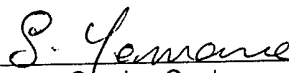
## RESPONSE TO REQUEST FOR CORRECTED FILING RECEIPT

### Claims, Fees, and Inventors

In response to your request for a corrected Filing Receipt, the Office is unable to comply with the request because:

- ☐ The total number of claims appearing on the Filing Receipt does not include multiple dependent claims. The total fee appearing on the Filing Receipt includes the cost of multiple dependent claims that were present at the time the application was filed.
- ☐ The filing fee is correct. It may include additional claims fees and/or the surcharge under 37 CFR 1.16(e) for filing an oath/declaration or basic filing fee after the application filing date; or it may not reflect fees refunded to the applicant that were paid by mistake.
- ☐ The number of claims reflected on the filing receipt is correct. Upon review of the claims, it was found that there was a miscalculation by the applicant. This may be due to improperly presented multiple dependent claims, typographical error, misnumbering of the claims, or other oversight. An amendment may be necessary to correct the problem.
- ☐ The filing fee reflected on the filing receipt is correct. Applicant may have miscalculated the fees due.
- ☐ Applicant calculated fees as other than small entity; however, applicant asserted small entity status in the application. Therefore, fees were applied as small entity and the remainder was refunded to the applicant.
- ☐ The difference between the fees paid and the fees due was refunded to the applicant and will not be shown on the filing receipt.
- ☐ The inventor information may be truncated if the family name consists of more than 50 characters (letters and spaces combined) and if the given name consists of more than 50 characters (letters and spaces combined).

- ☐ The inventor's residence allows for up to 40 characters (letters and spaces combined).
- ☐ The inventor's residence will only include the city and state for U.S. residences or city and country for residences outside the U.S. (See MPEP 605.02).
- ☐ A petition to correct the inventorship is needed to make this change. See 37 CFR 1.48. For non-provisional applications, the petition should be directed to the Director of the examining group assigned to your application.
- ☐ Changes made after submission of an executed declaration to the inventor information other than correction of typographical errors must be submitted in the form of a substitute declaration. Change of inventorship requires a petition under 37 CFR 1.48.
- ☒ The number of drawings shown on the filing receipt reflects the number of drawing sheets submitted and is not necessarily equal to the number of figures submitted.
- ☐ The correspondence address was captured as directed by applicant on filing. If you wish correspondence to be directed otherwise, please submit a request for a change of address.
- ☐ The docket number allows a maximum of 25 characters.
- ☐ The person signing on behalf of the deceased inventor is reflected on the Filing Receipt as the legal representative.
- ☐ The filing date of a parent application cannot be changed by this request. A petition to correct the filing date in the parent application is required.

  
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Office of Initial Patent Examination  
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